

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055165

FILED  
Apr 09, 2008  
Secretary of State

Entity Name: CARLEY LANDSCAPING, LLC

## Current Principal Place of Business:

931 VILLAGE BLVD.  
STE 905-95  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

## Current Mailing Address:

931 VILLAGE BLVD.  
STE 905-95  
WEST PALM BEACH, FL 33409

## New Mailing Address:

FEI Number: 20-2991176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARDING, GEORGE E  
1645 PALM BEACH LAKES BLVD STE 1200  
WEST PALM BEACH, FL 33407 US

## Name and Address of New Registered Agent:

ORBIGOSO, FE M  
6044 HEATHER ST  
JUPITER, FL 33458 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FE M. ORBIGOSO

04/09/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: CARLEY, ALBERT C  
Address: 931 VILLAGE BLVD. STE 905-95  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: CARLEY, CARMEN J  
Address: 931 VILLAGE BLVD STE 905-95  
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALBERT C. CARLEY

MGRM

04/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date